

Application Form  
for member directly affiliated to IFA Liechtenstein

Address data

Family Name(s)\*

Titel (e.g.Prof., Dr.)

First Name(s)\*

Mailing Address  
(firm/company)

Street/No or PO Box

Province/country

Telephone

Fax

E-Mail

\*in case of corporate membership please fill out the company name

\*\*in case of corporate membership please fill out the representatives

Vita/References

Educational

Qualifications

Publications

Business or  
professional  
connections

Application for

Individual  corporate  membership

Enclosed two letters of recommendation by IFA members.

Signature:

Date:

Please sign and forward form and enclosures to:

IFA Liechtensteinische Vereinigung für Steuerrecht

Dr. iur. Marco Felder

Präsident, IFA Liechtenstein

Landstrasse 344

9495 Triesen

Contact: info@ifa-fl.li

LIECHTENSTEINISCHE  
VEREINIGUNG  
FÜR  
STEUERRECHT

